

Minutes / Action Items - Clerkship Committee Meeting			
MEETING	CLERKSHIP COMMITTEE MEETING MINUTES		
CHAIR	DR. JASON McCARTHY		
DATE	January 24, 2013		
MEMBERS: Clerkship Committee Names for UGME for 2012 -2013	<div> <i>Dr. Jason McCarthy (Chair)</i> <i>Dr. John Martin</i> <i>Dr. Jamie Farrell</i> <i>Dr. Tina Delaney</i> <i>Dr. Craig Stone - uses outside email address</i> <i>Dr. Richard Wedge, PEI – joins by teleconference</i> <i>Ms. Sally Ackerman</i> <i>Mr. David Watton (student)</i> <i>Mr. William Stokes (student)</i> <i>Ms. Jacqueline Mouris (Student, Special Invitee)</i> <i>Ms. Deanne Williams – Wellness Coordinator Student Affairs</i> <i>Ms. Melody Marshall – UGME Coordinator</i> <i>Ms. Angeles Damil - Administrative Coordinator, New Brunswick</i> <i>Minutes = Clerkship APA = ugme.clerkship@med.mun.ca (Minutes Taped)</i> </div> <div> <i>Dr. Donald McKay, Associate Dean, UGME</i> <i>Dr. Katherine Stringer</i> <i>Dr. Scott Moffatt</i> <i>Dr. Hubert White</i> <i>Dr. Todd Lambert, NB – joins by teleconference</i> <i>Dr. Scott Moffatt or Ms. Deanne Williams</i> </div>		
PARTICIPANTS	Attendees: J. McCarthy, D. McKay, J. Martin, J. Farrell, K. Stringer , T. Delaney, C. Stone, H. White, T. Lambert, A. Damil Students: W. Stokes, J. Mouris UGME: Melody Marshall, Wandalee Cole		
REGRETS	S. Ackerman, D. Watton, S. Moffatt, R. Wedge		
AGENDA	ITEM	DISCUSSION	ACTION
#1 WELCOME / MEETING START TIME	<ul style="list-style-type: none"> Item #1 J. McCarthy opened the meeting at 4:07 pm 	<ul style="list-style-type: none"> Call to Order Quorum in Attendance 	
#2 ADDITIONS TO THE AGENDA	<ul style="list-style-type: none"> Item #2 Agenda 	<ul style="list-style-type: none"> Agenda approved as circulated 	

#3 APPROVAL OF MINUTES: Nov 29, 2012	<ul style="list-style-type: none">Item #3 Minutes	<ul style="list-style-type: none">Minutes approved from December 13, 2013 as circulated.	ACTION: Minutes Approved. Moved: William Stokes Seconded: Dr. John Martin
#4 BUSINESS ARISING	<ul style="list-style-type: none">Item 4.1 Clerkship Handbook: Discipline Entries	<ul style="list-style-type: none">All clerkship handbook discipline entries are thought to be received.	ACTION: Remove from Agenda, unless there are outstanding entries.
	<ul style="list-style-type: none">Item 4.2 Clerkship Redev: Assessment Blueprinting	<ul style="list-style-type: none">No feedback re: outstanding entriesPurpose of the assessment blueprint is to ensure that the assessments are covering the objectivesNeed to ensure that we have an assessment that will cover all the agreed upon competencies (i.e. ITERs)	ACTION: Doctor McKay to confirm with HSIMS if all discipline information has been submitted. If so, remove from agenda.
	<ul style="list-style-type: none">Item 4.3 Assessment Rescheduling	<ul style="list-style-type: none">Please see attachment "Rescheduling Assessments in Clerkship"No issues in rescheduling following the Jan 10th snow stormNew Brunswick: invigilators would handle any rescheduling and following the same process as MUN (Angeles and Martina)<i>Rural Family Medicine concerns, as it is a different exam delivery method:</i><ul style="list-style-type: none">Committee agreed that a snow day should not result in a cancelled exam for Rural Family MedicineHSIMS ensured that a phone will be readily available for the FOM technical support representative to take home during a snow stormHSIMS do not update the FOM website re: storms/exams, therefore, students will need to check twitter feed to check cancellations/rescheduling's.Only possible issue that may arise is if a student loses power	ACTION: Dr. McKay to continue communication with HSIMS Will ensure the orientation packet includes the helpline # and the two most common problems/solutions

		at their personal residence.	
	<ul style="list-style-type: none">Item 4.4 Formative Assessment Policy	<p>Update from Dr. Curran re: the Summative Assessment policy:</p> <ul style="list-style-type: none">Was forwarded to Mr. Sean Murphy (Chair of the Undergraduate Medical Studies Committee) this was approved by the UGMS Committee. <p>The Formative Assessment Policy</p> <ul style="list-style-type: none">Seeking final feedback on the Formative Assessment PolicyMinor changes to reflect Clerkship (assessment policy includes pre-clerkship and clerkship)Dr. Curran reviewed the revisions <ul style="list-style-type: none">2.1 should read "In any core clerkship rotation greater or less than 4 weeks in duration students must receive one-to-one feedback on performance at the midpoint of the rotation. <p>2.1.4 "Narrative description of medical student performance, including non-cognitive achievement, should be provided to students in each core clerkship rotation as part of their formative assessment wherever teacher-student interaction permits this form of feedback.</p> <p>2.1.5 "The provision of formative assessment in each core clerkship rotation is monitored by the Student Assessment Subcommittee.</p>	<p>ACTION (Formative Assessment Policy): Dr. Curran to present the advised Formative Assessment policy to the UGMS committee for approval</p> <p>Moved: William Stokes Seconded: Dr. John Martin</p>

	<ul style="list-style-type: none">Item 4.5 ITER Revisions	<ul style="list-style-type: none">Received feedback from half of the disciplines	ACTION: One week remaining to suggest changes to Doctor McKay. Update next clerkship meeting.
	<ul style="list-style-type: none">Item 4.6 Update: B2B Integrated OSCE	<ul style="list-style-type: none">Attempting to implement an OSCE during the Back to Basics course as a pilot: eventually we aspire to having a super OSCE that would run 2 – 3 times per year during the Clerkship.Each discipline coordinator identified a representative who would make cases for the OSCE (to date, this was mostly unsuccessful)The purpose of the Working Group was to create multiple OSCE cases/stations with objectives based on CanMeds roles or non-medical expert with each core discipline represented within the stations and deliver during the Back 2 Basics course (April 6, 13) as well as develop reassessment in case of student failure. This has now changed to a search for cases in conjunction with CLDC.Rooms booked, however, currently have 0 OSCE stations written or prepared.Previous meetings unsuccessful re: creation of stations.Aiming to avail of MedEd portal (resources that provide cases)CLDC (Continuous Learning and Development Centre) looking for some cases (looking for 8 cases, non-medical experts (1 for each discipline, evaluators (48 - 60 faculty)3 tracks for 8 stations x 3 runs + 353min (5 hrs 53 mins)Suggested that many faculty will be away due to the timeline (Easter break). Dr. White suggested contacting residents to assist (270 residents available)Further issues are funding (e.g. overtime for CLDC staff), CME credits for evaluators, evaluator recruiting criteria, etc.Dr. McCarthy may ask the CDCs to look over the cases if/when they become available. They may also be asked to help develop reassessment questions for each station.	ACTION: Dr. McCarthy to forwarded cases to Discipline Coordinators for review and feedback to ensure discipline relevance Dr. McKay and Dr. McCarthy to determine logistical pieces, explore CME credit, payment plan for CLDC staff Dr. McCarthy meeting with CLDC on February 5, 13

		<ul style="list-style-type: none">• Meeting Feb 5 with the CLDC people (OSCE WG) will result in a: “go” or “no-go” decision.• UGMS should also be informed of this change to the B2B course if the OSCE goes ahead.	
#5 NEW BUSINESS	<ul style="list-style-type: none">• Item 5.1 ED-27: Direct Observation of Student Performance	<p>Question at hand: Is there a witnessed Hx/Px examination that is taking place in each core clerkship rotation? If so, what is the documentation process?</p> <p>Answer:</p> <ol style="list-style-type: none">1. Partly through the Canadian Graduate Questionnaire (are you having a witnessed Hx/Px?)2. We provide proof through the Clinical Encounter Card <p>Need to define witness part (is it witnessed by Faculty or Resident – it may be that the accreditation standard demands that it be witnessed by a Faculty member)</p> <p>Need to define the scope of the Hx/Px. Should the Hx/Px required be a full Hx/Px or should it be focused Hx/Px?</p> <p>Dr. Peters previously requested, through email, feedback from the Clinical Encounter Cards from each discipline To date Dr. Peters has not received feedback from three disciplines Please recall a prior email (approximately 3 weeks ago) inquiring re: how are/is the check box being utilized (to date no response has been given from Pediatrics, Obs/Gyne and Surgery)</p>	<p>ACTION: Important to ensure that clerks are being observed and make students recognize that they are having a witnessed Hx/Px</p> <p>Discipline Coordinators to provide feedback to Dr. Peters</p> <p>Doctor McKay and McCarthy to meet with Doctor Peters to determine Full or Focused? Are residents satisfactory? And communicate opinions of the Clerkship Committee</p>
	<ul style="list-style-type: none">• Item 5.2 ED-31: Med-Course and Clerkship	<p>Question: For Each Clerkship Rotation is this being done and what is the process in various sites?</p>	<p>ACTION: Doctor McCarthy to send reminder email to Discipline Coordinators to</p>

	Feedback	Dr. Peters previously requested feedback, through email, from Discipline Coordinators	communicate with Sally Ackerman re: explanation on Clinical Encounter Cards with respect to ED-27 and how executing ED-31 (ensure ccing Doctor Peters and Doctor McCarthy)
	<ul style="list-style-type: none"> Item 5.3 21 Month Clerkship Track 	<p>Doctor McCarthy reviewed tentative document re: 21 month Clerkship Track Q & A</p> <ul style="list-style-type: none"> 21 Month Track implemented in early 2012 (break 3rd and 4th year) Will first be applied to students beginning of 2012 (class of 2016) Current students may opt for the 21 month track simply by sending an email to ugme.clerkship@med.mun.ca, Ms. Melody Marshall or Doctor McCarthy 	<p>ACTION: Ms. Marshall to explore options of placing a survey on One45 which will allow students to opt for the 21 month track.</p> <p>Dr. McCarthy to add that it is felt that it would be advantageous for students to follow the 21 month track and the questions provided will explain/support why it is beneficial. Dr. McCarthy should encourage students to opt for the 21month track.</p>
	<ul style="list-style-type: none"> Item 5.4 Schedule Med IV: Class of 2014 	<p>Student William Stokes suggested including a pre-amble that describes the Core rotation/electives/vacation dates in the template. He displayed a template that he had developed for personal use/clarification of timelines.</p>	<p>ACTION: William to email a copy of his template to Wandalee Cole</p> <p>Wandalee to add suggestions to the template</p>
	<ul style="list-style-type: none"> Item 5.5 University Diary Entry for 2013-14 	<p>Dr. McKay reviewed the handout and highlighted the Christmas Break.</p> <p>3rd year - should students start December 30, 2012 or January 6, 2014?</p> <p>4th year – CaRMS begins on a Saturday and it is important to give students travel time, therefore, gave students option to begin December 30, 13 or, due to timelines, no later than January 6,2014</p>	<p>ACTION: Committee agreed that all 3rd students will begin Jan 6, 2014. 4th year students may begin on Dec 30th, but the latest date for restarting post Christmas break is Jan 6, 2014</p>
	<ul style="list-style-type: none"> Item 5.6 Med III Rotation Template: Class of 	<p>Dr. McKay stated that we will need to extend the pre-Christmas end date to Dec 20, 13</p> <p>Christmas Break (Dec 21, 13 – Jan 5, 14)</p>	<p>ACTION: Committee agreed that 3rd year template would be changed to reflect new agreed</p>

	2015		upon Christmas Break and Post-Christmas start date
#6 Standing Items	<ul style="list-style-type: none"> Item 6.1 Medical Student Reports 	<p>Jacqueline Mouris reported that NB Core Clerkship is going very well. Ms. Mouris addressed some minor concerns:</p> <ol style="list-style-type: none"> Academic ½ day – timeline different between NB and NL students make ½ days difficult re: resource material, technical issues (Doctor Stringer suggested taking an online approach) Forms – Slow turnaround One45 – duplicates in rotations <p>William Stokes inquired re: vacation dates? Doctor McCarthy clarified question</p>	<p>ACTION: Doctor McCarthy and Doctor McKay to explore academic ½ days online through HSIMS and PDCS (Internal Medicine willing to test run)</p> <p>Committee asked Ms. Mouris to give examples re: slow form turnaround and Doctor McKay to follow up</p> <p>Wandalee Cole (UGME) currently working with Adam Siscoe (HSIMS) to make necessary changes to avoid rotation duplications Doctor McCarthy to send documentation out re: vacation</p> <ol style="list-style-type: none"> Med III – IV track 21 Month Track
	<ul style="list-style-type: none"> Item 6.2 MUN-NB Update (Lambert) 	<p>Nothing to report</p> <p>Doctor McKay communicated that the NB on-site, as well as various counterpart meetings was very successful.</p>	<p>ACTION: Will strive to hold annual NB on-site meetings</p>
	<ul style="list-style-type: none"> Item 6.3 MUN-PEI Update (Wedge) 	In the absence of Dr. Wedge the MUN-PEI update is deferred to next meeting.	
	<ul style="list-style-type: none"> Item 6.4 Accreditation 2013 		
	<ul style="list-style-type: none"> Item 6.4.1 ED-30: Formative and Summative Ax (McCarthy) 	Final evaluations should be available within 4 – 6 weeks of the end of a rotation	<p>ACTION: Assessment (UGME) currently working with HSIMS to produce a report that will inform when grades have been posted to ONE45</p>

			Summative ITER corrections should be completed within 10 days <u>We must achieve the 4 – 6 weeks mark</u>
	<ul style="list-style-type: none">Item 6.4.2 ED-1: Mapping Objectives (McCarthy)		ACTION: Obtained and ok to remove from Agenda
#7 ADJOURNMENT		Clerkship Committee Meeting Adjourned at 6:00pm	
Next Meeting		February 7, 2013 @ 4pm (PDCS)	